

COMMERCIAL PERMIT APPLICATION

1. PROJECT INFORMATION									
Project Address:		Project Name /							
				Descri	ption:				
Lot /	Block:		Subdivision /					Lot Size:	
Tract:			Survey:		T			(sq. ft.)	
TDLR Project #			Fire Fire						
EABPRJ			Alarm: Yes	No _		Sprii	nklered:		No
Valuation		Construction		Use		Zoning:			
of Job: \$			Type:		Group:				
Type of Work: New Shell Only Finish-Out Addition Alteration Demolition Other									
Water Supply:				Titterat			Fire		
City Size of Water Service			Meter Well					District:	
Sanitary Sewer:								Flood	
			tic If septic, attach Health Dept. permit					Hazard:	
Total Building Area of		Number of			1 1	Building			
Area: 1 st Floor						Height:			
2. BUILDING OWNER INFORMATION									
Name:			Address:		City/State/Zip:				
Phone:			Fax: Ema			l:			
3. ARCHITECT / ENGINEER / DESIGNER INFORMATION									
Name:			Address:		City/State/Zip:				
Phone:		Fax:		Email:					
4. CONTRACTOR INFORMATION									
Name:		Address:	City/State/			Zip:			
Phone:		Fax:	Email:						
5. PLEASE READ CAREFULLY									
➤ Be advised incomplete applications may be rejected, denied or cause permit processing delays.									
Has an Asbestos Survey/Certification Form been provided? Yes No NR (attach documentation)									
> Has a Bond Form been provided? Yes No NR (attach documentation)									
This permit becomes null and void if work authorized is not commenced within 180 days of issuance or if work is									
suspended or abandoned for a period of 180 days at any time after work is commenced.									
I hereby certify that I am the property owner or their authorized agent, and have the owner's consent to apply for the									
permit requested and receive all subsequent communications and business related to this application. I further certify									
that the information provided is true and correct to the best of my knowledge. This work shall comply with all									
provisions of laws and ordinances, whether specified or not. The granting of a permit does not presume to give									
authority to violate or cancel the provisions of any federal, state or local law regulating construction or the performance of construction.									
Signature of Applicant: Date:									
orginature or Appricant.				Dat					
Printed Name of Applicant:				Pho	one:				
Email:				Fax	:				

Office: 432-685-7390 - Fax 432-686-1609

Ver: 8/30/10